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CONFIRMATION NO. 2803

|                                                                                                                                                                                                                                                                                                            |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| <b>SERIAL NUMBER</b><br>10/501,589                                                                                                                                                                                                                                                                         | <b>FILING OR 371(c) DATE</b><br>04/18/2005<br><b>RULE</b>                                                         | <b>CLASS</b><br>277                       | <b>GROUP ART UNIT</b><br>3676                                                                                                                                                                                                                                                   | <b>ATTORNEY DOCKET NO.</b><br>9052-200 |
| <b>APPLICANTS</b><br>Alan James Roddis, Sheffield, UNITED KINGDOM;                                                                                                                                                                                                                                         |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/GB03/00088 01/14/2003                                                                                                                                                                                                                  |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
| <b>** FOREIGN APPLICATIONS *****</b><br>UNITED KINGDOM 0200701.1 01/14/2002                                                                                                                                                                                                                                |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____ |                                                                                                                   | <b>STATE OR COUNTRY</b><br>UNITED KINGDOM | <b>SHEETS DRAWING</b><br>10                                                                                                                                                                                                                                                     | <b>TOTAL CLAIMS</b><br>6               |
|                                                                                                                                                                                                                                                                                                            |                                                                                                                   |                                           | <b>INDEPENDENT CLAIMS</b><br>1                                                                                                                                                                                                                                                  |                                        |
| <b>ADDRESS</b><br>20792                                                                                                                                                                                                                                                                                    |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
| <b>TITLE</b><br>Modular mechanical seal                                                                                                                                                                                                                                                                    |                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                 |                                        |
| <b>FILING FEE RECEIVED</b><br>1050                                                                                                                                                                                                                                                                         | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                           | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                        |